



**City Clerk's Office  
City of Amesbury  
Vital Records Request Form**

**Birth Certificate [\$10.00 each]:**

Name: \_\_\_\_\_ (Maiden if married)

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

# of Certified Copies: \_\_\_\_\_ [\$10.00 each]

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**Death Certificate [\$10.00 each]:**

Name of Deceased: \_\_\_\_\_

Date of Death: \_\_\_\_/\_\_\_\_/\_\_\_\_

# of Certified Copies: \_\_\_\_\_ [\$10.00 each]

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**Marriage Certificate [\$10.00 each]:**

\*Please provide maiden name where applicable

Party A's Name: \_\_\_\_\_

Party B's Name: \_\_\_\_\_

Date of Marriage: \_\_\_\_/\_\_\_\_/\_\_\_\_

# of Certified Copies: \_\_\_\_\_ [\$10.00 each]

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**Where to mail your certificates to:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_; State: \_\_\_\_\_; Zip Code \_\_\_\_\_

Phone #: \_\_\_\_\_

**Mail to this form to:**

City Clerk's Office  
62 Friend St.  
Amesbury, MA 01913